S

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS			Use separate sch for each category Detailed Summan	of the	FOR LINE NUMBER: PAGE 56 OF 58 (check only one) X 17
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NAME OF COMMITTEE (In Full) Friends of Joe Heck					
	Full Name (Last, First, Middle Initial) Bankcard Center				Date of Disbursement
	Mailing Address PO Box 30833				11 21 2014
	City Salt Lake City Purpose of Disbursement See Below/Catering & Facility Fees	State UT	Zip Code 84130-		Amount of Each Disbursement this Period 1146.79 Transaction ID: 41202.E2418
	Senate President State: District:	rsement For Primary Other (s	General	Category/ Type	SEE BELOW/CATERING & FACILITY FEES
3.	Il Name (Last, First, Middle Initial) Red Rock Casino ailing Address 11011 West Charleston Boulevard				Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State NV	Zip Code 89135-		Amount of Each Disbursement this Period
		rsement For Primary Other (s	: General	Category/ Type	Transaction ID : 41202.E2419 [MEMO ITEM] MEMO: CATERING & FACILITY FEES
	Full Name (Last, First, Middle Initial)				Date of Disbursement
-	Piryx Inc. Mailing Address 144 2nd Street 1st Floor				11 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	San Francisco C Purpose of Disbursement Merchant Processing Fees Candidate Name	se of Disbursement hant Processing Fees date Name			Amount of Each Disbursement this Period 27.63 Transaction ID: 41106.E2401 MERCHANT PROCESSING FEES
	Senate President State: District:	Primary Other (s	General pecify)		1174.42
SI	JBTOTAL of Disbursements This Page (optional	ıl)			

TOTAL This Period (last page this line number only).....